

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITI/ LS	ID NO.	DATE
FEE DETERMINATION	QG		01/1998
O.I.P.E. CLASSIFIER	12		10/12/98
FORMALITY REVIEW	CM	71632	10/18/98

## **INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date					
Final	Original	1/1/67	1/1/68	1/1/69	1/1/70	1/1/71
1	✓	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓	✓
11	✓	✓	✓	✓	✓	✓
12	✓	✓	✓	✓	✓	✓
13	✓	✓	✓	✓	✓	✓
14	✓	✓	✓	✓	✓	✓
15	✓	✓	✓	✓	✓	✓
16	✓	✓	✓	✓	✓	✓
17	✓	✓	✓	✓	✓	✓
18	✓	✓	✓	✓	✓	✓
19	✓	✓	✓	✓	✓	✓
20	✓	✓	✓	✓	✓	✓
21	✓	✓	✓	✓	✓	✓
22	✓	✓	✓	✓	✓	✓
23	✓	✓	✓	✓	✓	✓
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25	✓	✓	✓	✓	✓	✓
26	✓	✓	✓	✓	✓	✓
27	✓	✓	✓	✓	✓	✓
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31	✓	✓	✓	✓	✓	✓
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33	✓	✓	✓	✓	✓	✓
34	✓	✓	✓	✓	✓	✓
35	✓	✓	✓	✓	✓	✓
36	✓	✓	✓	✓	✓	✓
37	✓	✓	✓	✓	✓	✓
38	✓	✓	✓	✓	✓	✓
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40	✓	✓	✓	✓	✓	✓
41	✓	✓	✓	✓	✓	✓
42	✓	✓	✓	✓	✓	✓
43	✓	✓	✓	✓	✓	✓
44	✓	✓	✓	✓	✓	✓
45	✓	✓	✓	✓	✓	✓
46	✓	✓	✓	✓	✓	✓
47	✓	✓	✓	✓	✓	✓
48	✓	✓	✓	✓	✓	✓
49	✓	✓	✓	✓	✓	✓
50	✓	✓	✓	✓	✓	✓

Claim		Date
Final		
Original	7/1/2012	
51	✓	7/1/2012
52	✓	7/1/2012
53	✓	7/1/2012
54	✓	7/1/2012
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Claim	Date				
Final Original					
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If more than 150 claims or 10 actions  
staple additional sheet here

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